



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## BIB DATA SHEET

CONFIRMATION NO. 2598

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/790,885	03/01/2004	600	3735	307-002-09	
<b>RULE</b>					
<b>APPLICANTS</b> Richard Kaplan, Richmond Heights, OH; Kenneth A. Loparo, Chesterland, OH; <b>** CONTINUING DATA *****</b> This appln claims benefit of 60/451,055 02/28/2003 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 05/22/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SAMUEL G GILBERT/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance  Initials	<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWINGS</b> 9	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> Karr Tuttle Campbell ATTN: PRIYA SINHA CLOUTIER 1201 Third Ave., Ste 2900 Seattle, WA 98101 UNITED STATES					
<b>TITLE</b> Automated insomnia treatment system					
<b>FILING FEE RECEIVED</b> 863	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	